

APPENDIX A:
STRATEGIC PLANNING AT THE
TEXAS DEPARTMENT OF HEALTH

Strategic Planning in the Texas Department of Health

Testing assumptions and aligning activities in a changing environment

What does Texas Department of Health (TDH) do, and why do we do it? How well do we perform our duties? Are we oriented to the right issues? These questions permeated the agency's planning process since the completion of the 1999-2003 strategic plan.

Strategic planning at TDH works in two spheres of planning and management:

- Our diverse duties and the categorical funding streams require close attention to achieve the best outcomes.
- The nature of the problems that threaten the public's health in Texas have shifted over the past decades, plus the state's population is growing and changing. We must assess and plan to make sure that our attention is focused on priorities that will have the greatest impact in improving health.

The aim of the agency's strategic planning process is to bring both spheres together to produce a health improvement plan for the state.

House Bill 2085, 76th Legislative Session, which requires a comprehensive strategic and operational plan for TDH (the Sunset Service Blueprint) is a potential quantum leap ahead. The first iteration is due in September of 2000. Meanwhile, several elements of the planning process (see "Chronology" below) over the last biennium deserve highlighting as specific areas of progress to date.

Progress: Improved clarity of mission, vision, and philosophy

In its 1999-2003 Strategic Plan, TDH named four principles that were to form the basis of the strategic directions the agency would pursue in the future:

- Making **prevention** the priority of public health efforts,
- Ensuring that public health efforts lead to improved health **outcomes**,
- Supporting **community based solutions**,
- Responsibly carrying out the state's **leadership** role.

Over the past two years, the Strategic Planning Steering Committee (consisting of the Board of Health, the Commissioner of Health, and the Executive Deputy Commissioner of Health) built on those basic ideas to clarify the agency's role in the state and to declare the philosophy by which the agency works. Through a series of dialogs with customers, partners, and stakeholders including state and local government officials, the Texas Association of Local Health Officials, and TDH staff in the central office and in each of the state regions, the committee members discussed what it would mean for TDH to incorporate these principles, and how they would affect the way we work with our partners and how our operations would change. This two-year process of drafting and testing statements with stakeholders resulted in the new vision, mission, and philosophy statements that appear at the beginning of this plan.

Two ways in which the agency has started to practice the principles behind the statements are the linking of performance measures to health status outcomes, and the highlighting of public health practice at the community level in Strategy E.2.4, Coordinated Essential Public Health Services, and Strategy 1.3.6, Children and Public Health. The challenge for the next biennium is to fully align the agency's goals, objectives, strategies, and activities with these principles.

Progress: Increased stakeholder participation

The planning process has taken several steps to improve input and feedback components, involving internal and external customers to a higher degree than before. Although various programs at TDH have made it standard practice to communicate with their customers and stakeholder constituencies, the processes by which stakeholder input is solicited for the department at large has become more systematic for this strategic plan. Examples include:

- The Commissioner's written request for input on public health issues to 500 external stakeholders statewide;
- Creation of the Commissioner's Council for Local Public Health, a 23 member group consisting of local health department officials, elected officials, and county and municipal association representatives, which meets bimonthly;

- Participation by representatives of each of the state public health regional offices in the Health and Human Service Agencies' 21 Local Planning Forums;
- The appointment of a Customer Service Representative for the agency as a whole; and
- The creation of the Compact with Texans for agency customer service.

Progress: Planning enlivened through Board of Health commitment and agency-wide involvement

The Board of Health's direct engagement in the planning and management process remains high. The Strategic Planning Committee meets approximately nine times per year, allowing the board to participate in assessment, planning, management, and evaluation. In addition to its efforts to seek out and speak with stakeholder and customer groups with a structured communication plan, the Board of Health instituted an ongoing review of its 24 appointed advisory committees to make sure these bodies are being consulted most effectively in their advisory roles.

The agency's ongoing strategic planning process now involves staff from throughout the department in the research and monitoring of health issues; review of goals, objectives and strategies; internal assessment, and the actual writing of the document. This approach has increased the input of agency-wide expertise in understanding the state's important public health issues and the agency's management processes. Additionally, important initial steps have been taken to balance the involvement of the central and regional offices in the agency planning, anticipating movement towards coordinated regional business plans and stimulation of public health improvement plans by and for local level communities.

Progress: Improving Interagency Coordination

Appendix J outlines TDH commitment to the Health and Human Service Agencies' Strategic Priorities. The guiding principles of the strategic priorities are to remove barriers through administrative streamlining among the state agencies and to improve collaboration, communication, and outreach at the local level.

Strategic Planning in Texas Department of Health: A chronology of strategic planning and strategic management events

- June 1998: TDH submits Strategic Plan for 1999-2003
- July 1998: Board of Health completes dialogs with external partners and internal staff to clarify future strategic directions.
- July 1998: Board of Health begins ongoing review of appointed advisory committees to optimize their participation in agency issues.
- August 1998 - Feb 2000: Strategic Planning Steering Committee drafts, tests, and finalizes vision, mission, and philosophy statements with stakeholder input.
- September – October 1998: TDH reorganization process develops new agency organizational structure to emphasize the agency’s major principles.
- October 1998— January 1999: Agency conducts assessment of the external environment and its impact on the agency’s operations.
- January 1999: Regional and Central Office executive staff gather to examine assumptions behind agency’s existing goals
- January — March 1999: Staff prepares documentation of threats to the state’s health to spur discussion of potential revision of goals.
- March – August 1999: TDH works with local health departments and Centers for Disease Control to review and pilot local and state public health system performance standards, related to essential public health functions.
- May 1999: HB 2085 (TDH Sunset Bill) passes and mandates comprehensive operational and strategic plan—the “service blueprint.”
- July—September 1999: Health and Human Service agencies host 21 Local Planning Forums with Councils of Governments and United Ways; TDH regional offices participate as agency representatives.
- August—November 1999: Agency develops strategies for service blueprint, defining the challenge and designing the process.
- August—November 1999: Health and Human Service Commission gathers interagency workgroups for implementing HHSC sunset bill, including charges related to coordinated planning among agencies.
- August 1999—June 2000: Department develops plan to deploy state employees to local public health units as community-based public health generalists.

- September - October 1999: Staff conducts training for programs to assess and revise performance measures.
- October 1999: TDH conducts Survey of Organizational Excellence
- November 1999 – January 2000: TDH conducts internal assessment
- December 1999—January 2000: TDH surveys stakeholders (500 including Local Health Departments, Advisory Committees, other state agencies, community based agencies, community-based providers, individuals, employees of TDH) on public health issues and recommendation to address them.
- January 2000—February 2000: TDH finalizes budget structure for FY 02-03
- February 2000—March 2000: HHSC finalizes Health and Human Service agencies' strategic priorities.
- March 2000: TDH conducts review of highlights of departmental activity by region.

